



18351 U.S. PTO

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<b>UTILITY PATENT APPLICATION TRANSMITTAL</b>  (Only for new nonprovisional applications under 37 CFR 1.53(b))	Attorney Docket No.		Total Pages	
	First Named Inventor or Application Identifier <b>David K. Williams</b>			
	Express Mail Label No.			

APPLICATION ELEMENTS <i>See MPEP chapter 600 concerning utility patent application contents.</i>	ADDRESS TO: Mail Stop Patent Application Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450
1. <input checked="" type="checkbox"/> Fee Transmittal Form (Submit an original, and a duplicate for fee processing)	6. <input type="checkbox"/> Microfiche Computer Program (Appendix)
2. <input checked="" type="checkbox"/> Specification <b>Total Pages 13</b> (preferred arrangement set forth below) -Descriptive -Cross References to Related Application -Statement Regarding Fed sponsored R & D -Reference to Microfiche Appendix -Background of the Invention -Brief Summary of the Invention -Brief Description of the Drawings (if filed) -Detailed Description -Claim(s) -Abstract of the Disclosure	7. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary)  a. <input type="checkbox"/> Computer Readable Copy b. <input type="checkbox"/> Paper Copy (identical to computer copy) c. <input type="checkbox"/> Statement verifying identity of above copies
3. <input checked="" type="checkbox"/> Drawing(s) (35 USC 113) <b>Total Sheets 9</b> <b>Total Pages 9</b>	<b>ACCOMPANYING APPLICATION PARTS</b> 8. <input type="checkbox"/> Assignment Papers (cover sheet & document(s)) 9. <input type="checkbox"/> 37 CFR 3.73(b) Statement <input type="checkbox"/> Power of Attorney (where there is an assignee) 10. <input type="checkbox"/> English Translation Document (if applicable) 11. <input type="checkbox"/> Information Disclosure <input type="checkbox"/> Copies of IDS Statement (IDS)/PTO-1449 Citations 12. <input type="checkbox"/> Preliminary Amendment 13. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) 14. <input type="checkbox"/> Small Entity <input type="checkbox"/> Statement filed in prior application Statement(s) Status still proper and desired 15. <input type="checkbox"/> Certified Copy of Priority Document(s) (if foreign priority is claimed) 16. <input type="checkbox"/> Other PTO-2038
4. Oath or Declaration a. <input checked="" type="checkbox"/> Newly executed (original or copy) b. <input type="checkbox"/> Copy from a prior application (37CFR 1.63(d)) (for continuation/divisional with Box 17 completed) [Note Box 5 below] i. <input type="checkbox"/> <b>DELETION OF INVENTOR(S)</b> Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).	
5. <input type="checkbox"/> Incorporation By Reference (useable if Box 4b is checked) The entire disclosure of the prior application, from which a copy of the oath or declaration is supplied under Box 4b, is considered as being part of the disclosure of the accompanying application and is hereby incorporated by reference therein.	
17. <input type="checkbox"/> Continuation <input type="checkbox"/> Divisional <input type="checkbox"/> Continuation-in-part (CIP) of prior application No: _____	
<b>18. CORRESPONDENCE ADDRESS</b>	

<input type="checkbox"/> Customer Number or Bar Code Label		<input type="checkbox"/> Correspondence address below	
(Insert Customer No. or Attach bar code label here)			
NAME	David K. Williams		
ADDRESS	12290 Highway 181 South, #19		
CITY	San Antonio	STATE	Texas
COUNTRY	USA	TELEPHONE	(210) 633-3203
		ZIP CODE	78223
		Fax	

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<b>FEE TRANSMITTAL</b>		<b>Complete if Known</b>	
		Applicant Number	Unassigned
		Filing Date	Herewith
		First Named Inventor	David K. Williams
		Group Art Unit	Unassigned
Examiner Name		Unassigned	
TOTAL AMOUNT OF PAYMENT		(\$) <b>385.00</b>	
Attorney Docket Number			

METHOD OF PAYMENT (check one)		FEE CALCULATION (continued)																																																																																																																																																																															
<p>1. <input type="checkbox"/> The Commissioner is hereby authorized to charge indicated fees and credit any over payments to:</p> <p>Deposit Account Number _____</p> <p>Deposit Account Name _____</p> <p><input type="checkbox"/> Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17      <input type="checkbox"/> Charge the Issue Fee Set in 37 CFR 1.18 at the Mailing of the Notice of Allowance, 37 CFR 1.31(b)</p> <p>2. <input checked="" type="checkbox"/> Payment Enclosed:</p> <p><input type="checkbox"/> Check    <input type="checkbox"/> Money Order    <input type="checkbox"/> Other</p>		<p><b>3. ADDITIONAL FEES</b></p> <table><thead><tr><th>Large Fee Code</th><th>Entity Fee (\$)</th><th>Small Fee Code</th><th>Entity Fee (\$)</th><th>Fee Description</th><th>Fee Paid</th></tr></thead><tbody><tr><td>105</td><td>130</td><td>205</td><td>65</td><td>Surcharge - late filing fee or oath</td><td>—</td></tr><tr><td>127</td><td>50</td><td>227</td><td>25</td><td>Surcharge - late provisional filing or cover sheet.</td><td>—</td></tr><tr><td>139</td><td>130</td><td>139</td><td>130</td><td>Non-English specification</td><td>—</td></tr><tr><td>147</td><td>2,520</td><td>147</td><td>2,520</td><td>For filing a request for reexamination</td><td>—</td></tr><tr><td>112</td><td>920</td><td>112</td><td>920</td><td>Requesting publication of SIR prior to Examiner action</td><td>—</td></tr><tr><td>113</td><td>1,840</td><td>113</td><td>1,840</td><td>Requesting publication of SIR after Examiner action</td><td>—</td></tr><tr><td>115</td><td>110</td><td>215</td><td>55</td><td>Extension for response within first month</td><td>—</td></tr><tr><td>116</td><td>400</td><td>216</td><td>200</td><td>Extension for response within second month</td><td>—</td></tr><tr><td>117</td><td>950</td><td>217</td><td>475</td><td>Extension for response within third month</td><td>—</td></tr><tr><td>118</td><td>1,570</td><td>218</td><td>755</td><td>Extension for response within fourth month</td><td>—</td></tr><tr><td>119</td><td>310</td><td>219</td><td>155</td><td>Notice of Appeal</td><td>—</td></tr><tr><td>120</td><td>310</td><td>220</td><td>155</td><td>Filing a brief in support of an appeal</td><td>—</td></tr><tr><td>121</td><td>270</td><td>221</td><td>135</td><td>Request for oral hearing</td><td>—</td></tr><tr><td>138</td><td>1,510</td><td>138</td><td>1,510</td><td>Petition to institute a public use proceeding</td><td>—</td></tr><tr><td>140</td><td>110</td><td>240</td><td>55</td><td>Petition to revive unavoidably abandoned application</td><td>—</td></tr><tr><td>141</td><td>1,320</td><td>241</td><td>660</td><td>Petition to revive unintentionally abandoned application</td><td>—</td></tr><tr><td>142</td><td>1,320</td><td>242</td><td>660</td><td>Utility issue fee (or reissue)</td><td>—</td></tr><tr><td>143</td><td>450</td><td>243</td><td>225</td><td>Design issue fee</td><td>—</td></tr><tr><td>144</td><td>670</td><td>244</td><td>335</td><td>Plant issue fee</td><td>—</td></tr><tr><td>122</td><td>130</td><td>122</td><td>130</td><td>Petitions to the Commissioner</td><td>—</td></tr><tr><td>123</td><td>50</td><td>123</td><td>50</td><td>Petitions related to provisional applications</td><td>—</td></tr><tr><td>126</td><td>240</td><td>126</td><td>240</td><td>Submission of Information Disclosure Stmt</td><td>—</td></tr><tr><td>581</td><td>40</td><td>581</td><td>40</td><td>Recording each patent assignment per property (times number of properties)</td><td>—</td></tr><tr><td>146</td><td>790</td><td>246</td><td>395</td><td>Filing a submission after final rejection (37 CFR 1.129(a))</td><td>—</td></tr><tr><td>149</td><td>790</td><td>249</td><td>395</td><td>For each additional invention to be examined (37 CFR 1.129(b))</td><td>—</td></tr><tr><td colspan="4">Other fee (specify) _____</td><td>—</td><td>—</td></tr><tr><td colspan="4">Other fee (specify) _____</td><td>—</td><td>—</td></tr><tr><td colspan="5"><b>SUBTOTAL (3)</b></td><td><b>(\$)</b> —</td></tr></tbody></table> <p>* Reduced by Basic Filing Fee Paid</p>		Large Fee Code	Entity Fee (\$)	Small Fee Code	Entity Fee (\$)	Fee Description	Fee Paid	105	130	205	65	Surcharge - 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SUBMITTED BY		Complete (if applicable)			
Typed or Printed Name	David K. Williams	Reg. Number			
Signature		Date		Deposit Acct. User ID	